

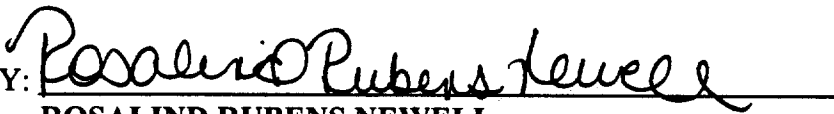
Entered - 04/09/01 - sb
CL01L0218 - DIANNE C. MITCHELL

01-R-1050

CLAIM OF: **ARTHUR R. DUGGER**
1250 West Marietta Street, NW
Atlanta, Georgia 30318

For damages alleged to have been sustained as a result of a vehicular
accident on February 28, 2001 at 1250 West Marietta Street, NW.

THIS ADVERSED REPORT IS APPROVED

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0218

Date: June 19, 2001

Claimant /Victim ARTHUR R. DUGGER

BY: (Atty)(Ins. Co.)

Address: 1250 West Marietta Street, NW, Atlanta, Georgia 30318

Subrogation: Claim for Property damage \$ 17,500.00 Bodily Injury \$

Date of Notice: 05/01/01 Method: Written, proper X Improper

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 02/28/01 Place: 1250 West Marietta Street, NW

Department PRCA Division:

Employee involved John Nash Disciplinary Action: Pending

NATURE OF CLAIM: The driver of the City vehicle lost control of same, left the roadway and collided with the claimant's building causing damages in the above amount. The claimant has rejected the City's settlement offer and has elected to receive payment for his damages through his insurance carrier.

INVESTIGATION:

Statements: City employee Claimant Others Written Oral

Pictures Diagrams Reports: Police X Dept Report X Other

Traffic citations issued: City Driver X Claimant Driver

Citation disposition: City Driver Claimant Driver

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial

Improper Notice More than Six Months Other Damages reasonable

City not involved Offer rejected X Compromise settlement

Repair/replacement by Ins. Co. X Repair/replacement by City Forces

Claimant Negligent City Negligent X Joint Claim Abandoned

Respectfully submitted,


INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2J01 2H01

Claims Manager: Dianne C. Mitchell Concur/date 06/19/01

Committee Action: Council Action

Apr '04 01 12:29p

Collins & Company, Inc.

770-428-2515

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Apr 04 01 10:15a

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404-658-7082 Stern

M. Mitchell
04/09/01
PMCOUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERKCity Hall
25 Trinity Avenue, S.W.
Atlanta, Georgia 30335

Dear Municipal Clerk:

RE: CLAIM FOR DAMAGES

Today's Date 4-4-01

ENTERED - 4-9-01 - SB

0110218 - DIANNE MITCHELL

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ Approx \$17,500 property and/or \$ 0 bodily injury for which I contend the City is liable.1. Date of incident: 2/28/01 2. Time of incident: 10:58 A.M. 3. Police called: Yes No4. Location of incident (including exact address): 1250 West Marietta St. NW Atlanta5. Name of your insurance company: The Hartford Policy No. 20 SBA K081986. State what and how incident occurred: Vehicle owned by City of Atlanta ran into the front of my building.

ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

7. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: n/a Building (Make) (Year) (Tag Number) (Driver's Name)City vehicle 2000 chev VIN 9023 John Nash (Make) (City Driver's Name) (Department/Bureau)8. Witness: n/a (Name) (Address) (Telephone Number)

10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Arthur R. Dugger
Signature of ClaimantARTHUR R. DUGGER
(Print Claimant's Name)1250 W. MARIETTA ST.
(Address)ATLANTA, GA. 30318
(City, State and Zip Code)404-794-3344
(Work Number) (Home Number)

01-R-1050